

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NRSC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TIGANI, JAMES, V., MR., JR.**

Mailing Address 940 N LAKE WAY

City  
PALM BEACH

State  
FL

Zip Code  
33480-3323

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2022

**Transaction ID : SA11A.21663990**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TIGHE, JANET, , ,**

Mailing Address 2909 JUDGE MANLY DR.

City  
NEW BERN

State  
NC

Zip Code  
28562-9163

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2022

**Transaction ID : SA11A.21666141**

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TIGHE, JANET, , ,**

Mailing Address 2909 JUDGE MANLY DR.

City  
NEW BERN

State  
NC

Zip Code  
28562-9163

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

385.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2022

**Transaction ID : SA11A.21666254**

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

35.00